



Building Division
25 West Main Street
Auburn, WA 98001
(253) 931-3020

For Staff Use Only
Application No.:

Mechanical, Backflow & Plumbing Permit Application

Permit Type (circle): <i>Commercial</i> <i>or</i> <i>Residential</i> Mechanical Plumbing Backflow	Value of Construction \$			
Project Information/Description: _____ Parent Permit/Project Number: _____				
Site Address: _____				
Parcel No. (required): _____	Project /Tenant Name: _____			
Property Owner: _____	Phone No. _____			
Project Contact: _____	Phone No.: _____ Email: _____			
Contractor: _____ Phone No.: _____				
Address: _____				
State Contractors License #: _____ Auburn Business License #: _____				
Description of Work: Are you removing, replacing or adding sheet rock, framing or roofing to complete this work? _____ If yes, please explain: _____ Is there a building permit for the construction? _____ Permit No.: _____				
Plumbing (please indicate the number of new or relocated fixtures) <table style="width: 100%; border: none;"> <tr> <td style="width: 33%;"> ____ Bathtub ____ Clothes Washer ____ Dishwasher ____ Drinking Fountain ____ Floor Drain ____ Floor Sink ____ Water Service (size of pipe ____ inches) ____ Backflow Preventor: (size ____ inches) ____ DVCA ____ RPBA Describe: _____ </td> <td style="width: 33%;"> ____ Gas or Medical Gas Piping (# of outlets) ____ Grease Interceptor ____ Hose Bibb ____ Hot Water Heater ____ Kitchen/Bath/Laundry Sinks ____ Modular Building Connection ____ Other _____ </td> <td style="width: 33%;"> ____ Pool or Spa (circle one) ____ Roof Drains ____ Shower ____ Shower/Tub Combo ____ Toilet ____ Urinal </td> </tr> </table> <div style="text-align: right;"> Total Number of Fixtures _____ </div>		____ Bathtub ____ Clothes Washer ____ Dishwasher ____ Drinking Fountain ____ Floor Drain ____ Floor Sink ____ Water Service (size of pipe ____ inches) ____ Backflow Preventor: (size ____ inches) ____ DVCA ____ RPBA Describe: _____	____ Gas or Medical Gas Piping (# of outlets) ____ Grease Interceptor ____ Hose Bibb ____ Hot Water Heater ____ Kitchen/Bath/Laundry Sinks ____ Modular Building Connection ____ Other _____	____ Pool or Spa (circle one) ____ Roof Drains ____ Shower ____ Shower/Tub Combo ____ Toilet ____ Urinal
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Mechanical (please indicate the number of new or relocated appliances) <table style="width: 100%; border: none;"> <tr> <td style="width: 33%;"> Air Handling Unit/Air Conditioner/VAV ____ < 10,000 cfm ____ > 10,000 cfm Boiler/Compressor/Heat Pump/Roof Unit ____ > 50hp / >1.75M BTU ____ > 30hp / >1 - 1.75M BTU ____ > 15hp / >500 - 1M BTU ____ > 3hp / >100 - 500 BTU ____ <3hp / <100,000 BTU </td> <td style="width: 33%;"> ____ Fans – Stationary, incl. whole house ____ Fireplace Insert ____ Furnace < 100,000 BTUs ____ Gas Cook Top ____ Gas Dryer ____ Gas Piping (# of outlets) ____ Gas Stove/Range ____ Comm. Kitchen Exhaust Hood (type:____) </td> <td style="width: 33%;"> ____ HVAC Systems ____ Other _____ ____ Refrigeration Equipment ____ Unit Heater ____ Vents/Fans to Single Duct </td> </tr> </table> <div style="text-align: right;"> Total Number of Fixtures _____ </div>		Air Handling Unit/Air Conditioner/VAV ____ < 10,000 cfm ____ > 10,000 cfm Boiler/Compressor/Heat Pump/Roof Unit ____ > 50hp / >1.75M BTU ____ > 30hp / >1 - 1.75M BTU ____ > 15hp / >500 - 1M BTU ____ > 3hp / >100 - 500 BTU ____ <3hp / <100,000 BTU	____ Fans – Stationary, incl. whole house ____ Fireplace Insert ____ Furnace < 100,000 BTUs ____ Gas Cook Top ____ Gas Dryer ____ Gas Piping (# of outlets) ____ Gas Stove/Range ____ Comm. Kitchen Exhaust Hood (type:____)	____ HVAC Systems ____ Other _____ ____ Refrigeration Equipment ____ Unit Heater ____ Vents/Fans to Single Duct
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I certify the information furnished by me is true and correct and that I am the owner of the subject property or I have been given express permission by the owner of the subject property, to submit this application for permit. I will comply with all provisions of law, code and ordinances governing this type of construction work, including state contractor registration laws.

Application expires 190 days after Date Submitted

Owner/Agent _____ **Date** _____

See reverse for fees and plan review requirements

Plumbing Fee Worksheet		
Fixture	#	Fee
Toilet, Urinal		\$9.00
Bathtub, Shower, Tub/Shower, Combo		\$9.00
Kitchen, Bath or Laundry Sink		\$9.00
Clothes Washer, Dishwasher		\$9.00
Drinking Fountain, Ice Machine		\$9.00
Hose Bibb		\$9.00
Grease Interceptor, Floor Sink or Drain		\$9.00
Roof Drain, Rain Leaders		\$9.00
Water Service, Repair, Alteration		\$9.00
Other or Unclassified Fixtures		\$9.00
Water Heater		\$9.00
Modular Building Connection		\$9.00
Gas Piping		\$6.15
each addition outlet over 5		\$1.10
Medical Gas Piping		\$53.00
each additional outlet		\$6.00
Pool, Hot Tub, Spa – Private		\$9.00
Pool, Hot Tub, Spa – Public		\$9.00
Back Flow Preventor		
< 2"		\$9.00
> = 2"		\$17.00
Lawn Sprinkler		\$9.00
Permit Issuance Fee		\$22.00
Total		

Mechanical Fee Worksheet		
Fixture	#	Fee
Fans		\$9.00
Fireplace Insert, Wood Stove		\$12.00
Gas Stove, Cooktop or Range		\$12.00
Vents – Appliance		\$12.00
HVAC – ducts or diffuser		\$15.00
Unit Heater/Suspension/Wall/Floor		\$16.00
Furnace		\$16.00
Gas Piping		\$6.15
Each addition outlet over 5		\$1.10
Commercial Kitchen Exhaust Hood		
Class I		\$51.00
Class II		\$20.00
Air Handling Unit/Air Conditioner/VAV		
<10,000 cfm		\$11.00
>10,000 cfm		\$20.00
Boiler/Compressor/Heat Pump/Roof Unit		
> 50hp / >1.75M BTU		\$96.00
> 30hp / >1 - 1.75M BTU		\$58.00
> 15hp / >500 - 1M BTU		\$39.00
> 3hp / >100 - 500 BTU		\$29.00
< 3hp / <100,000 BTU		\$16.00
Permit Issuance Fee		\$25.00
Total		

Plan Review Requirements		
	Plumbing	Mechanical
Plans are required for:	<ul style="list-style-type: none"> New commercial buildings New multifamily projects over 4 units Roof drains & overflow systems Tenant Improvements Oil/Water separator or grease interceptor installation Underslab footing drains Laboratories 	<ul style="list-style-type: none"> New commercial buildings New multifamily projects over 4 units Relocation or addition of over more than 10 diffusers Commercial gas piping involving more than 3 stub outs Any ductwork penetration of fire rated walls or ceilings Complete HVAC systems and A/C units, heat pumps, roof tops units, kitchen hoods, boilers, compressors etc. Any work in a building that has a smoke control system
Number of copies	2 copies - Plan View w. Riser Diagram or Isometric	2 copies
Information needed on plans	Location and type of proposed fixtures Riser diagram with waste, vent, potable water piping location and size Pipe size and fixture units for sanitary and potable water systems Type of gas, bottle storage room alarm, size of piping for medical gas piping Details of drains/cleanouts and design in accordance with engineer's recommendation for under slab footing drains Pipe size and square footage or roof area for roof drains and cleanouts	Reflected ceiling plans – identify ductwork, equipment, piping, supply diffusers, return air grilles, fire dampers Roof plans – show equipment, vents, roof access and equipment screening Building cross section – show equipment, duct work and associated items List of equipment Equipment screening Energy equipment sizing calcs